State of Wisconsin
Department of Natural Resources
P.O. Box 7963
Madison, WI 53707

Transfer of Ownership to a Governmental Unit
Form 2450-162   (R 3/01)

TO BE FILED WITHIN 10 DAYS OF THE DATE OF THE DEED.

Notice: Completion of this form is mandatory to transfer any land enrolled under chapter 77, Wis Stats., to a governmental unit. The Department will not file the transfer unless this form is completed and sent. Personally identifiable information on this form is not intended to be used for any other purpose.

The following descriptions of land enrolled under a Forest Tax Law (Chapter 77, Wis. Stats.) have been sold or transferred to a unit of federal, state or local government:

Check One: ☐ Forest Cropland   ☐ Managed Forest Land

County _____

☐ E

Town or Village Name: _____   Township Number _____ N; Range _____   ☐ W

Descriptions: (attach additional pages if needed)

Name and Address of Grantor (Former Owner)	**Signature(s) of Grantor**
	To be signed by an officer of a corporation or by all owners having an interest in the land, or other authorized persons: **(Note: A copy of the new deed may be substituted for the former owner's signature.**

Please Type or Print

Name	Name	Date Signed
Street or Route	Name	Date Signed
City, State, Zip Code	Name	Date Signed

THE FOLLOWING SECTION IS TO BE COMPLETED BY THE GOVERNMENTAL UNIT (Please type or print in black ink)

Under and in accordance with ss. 77.10(2)(c) or 77.88(8), Wis. Stats., I acknowledge receipt of the above listed land and certify that the land will be used for either a public road, railroad, utility right-of-way, park, recreational trail, wildlife or fish habitat area or a public forest. I hereby petition that the land be withdrawn from the forest tax law program without assessment of a withdrawal tax.

Name of Governmental Owner as Listed On Instrument of Title	Daytime Telephone Number of Contact Person (include area code)
Name (to which correspondence should be sent)	
Street or Route	
City, State, Zip Code	

To be signed by an authorized representative of the governmental unit:

By _____   _____   _____
   Name   Title   Date